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MAY 1 0 2006

DATE: May 10, 2006

TO: Amendment
            Commissioner for Patents

ATTN: Examiner: Justin Philpott
            Art Unit: 2665

FAX NUMBER: (571) 273-8300

FROM: Roberta A. Young, Attorney for Applicant
            Registration No. 53,818

Total Number of Pages Sent: 9   (including this transmittal cover sheet)

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FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: PA451DIV2

ENCLOSED ARE:
• Amendment (6 pages)
• Transmittal (in duplicate)

APPLICANT: Ramin Rezaiifar
ASSIGNEE: QUALCOMM Incorporated
SERIAL NO.: 09/503.401
FILED: February 14, 2000
FOR: Channel Structure for Communication Systems

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Please contact Sheryl Schoen at (858) 658-5102 if all pages do not transmit.

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PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No.: 23696
Attorney Docket No.: PA451DIV2
In Re Application of: Rezaiifar   RECEIVED
Serial Number: 09/503,401   CENTRAL FAX CENTER
Filed: February 14, 2000
Examiner: Justin Philpott
Group Art Unit: 2665   MAY 1 0 2006

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	3	3	0	x $50 =	$0.00
Independent**	1	0	0	x $200 =	$0.0
Multiple Dependent Claim(s): ☐ Yes ☒ No				$360	$0.00
EXTENSION FEES		☒ One Month		$120	$120.00
		☐ Two Months		$450	$0.00
		☐ Three Months		$1020	$0.00
TERMINAL DISCLAIMER				$130	$0.00
*If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c.				TOTAL FEE	$120.00

4. ☐ Fee check in the amount of $_____ is enclosed to pay for any claim and/or extension fees.

5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of $120.00.
   The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.

6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: May 10, 2006   Signature: _Roberta A. Young_
                                              Roberta A. Young, Reg. No. 53,818
QUALCOMM Incorporated   (858) 658-5803
Attn: Patent Department
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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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Depositor's Name: _____
                  (type or print name)

Date: May 10, 2006

FACSIMILE

☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Sheryl Schoen
                  (type or print name)

Signature: _Sheryl Schoen_

(TRANSAMD.VER1.13-04/30/04)